National and International Field Trip/Excursion Authorization Form

School:			
Date(s) of Trip:			
Destination:			
Class: Teacher:			
Number of Students Going:			
Supervisor(s) (Male & female supervisors required for co-educational overnight field trips/excursions):			
Mode of Transportation.			
Method of Transportation:			

Driver(s):
Purpose and Objectives of Trip:
How does this complement and relate to the classroom program:
REGULAR SCHOOL PROGRAM – please provide information related to: A) program arrangements for students who choose to stay at school and not participate in this field trip/excursion; and B) arrangements for students who miss regular classes due to their participation in this field trip/excursion.
A:
B:

facilities en rout student health ir	EDURES – please provide information related to: first aid and medical e and on-site; medical training/qualifications of supervisors; awareness of aformation and, if need be, instructions regarding the administration of students; appropriate medical insurance, if the trip/excursion is
(transportation,	ease provide information related to: the cost of the field trip/excursion accommodations, meals, registration/entrance fees, rentals, etc); revenue t levy, fundraising activities, Division support, etc.).
TRIP ITINERAR	Y (if applicable) – please attach a copy.
	rip/excursion is approved, the parents will sign and return the Informed sion Forms to the school.
I,	, (teacher's name) have read Administrative
	'Field Trips and Excursions' and I understand and have complied with the
requirements as	outlined.
Date	Teacher Signature

TIMELINES

The timelines shown below, for the consideration, review, and approval of Field Trip Requests, shall be strictly enforced.

Preliminary App	roval Timelines:	
Category 3.0 Category 4.0	National International	3 months (written proposal) 6 months (written proposal)
Final Approval T	imelines:	
Category 1.0 Category 2.0 Category 3.0 Category 4.0	Day trip Overnight National International	2 days (Atrieve) 2 months (Atrieve) 2 months (Manual) 4 months (Manual)

According to the Category of the Field Trip or Excursion you are planning, please present the appropriate completed Form to the Principal according to schedules outlined below.

Category 3.0, or Category 4.0				
Principal's Preliminary approval for Category 3.0 or Category 4.0 is hereby granted pending receipt of the following information:				
Principal's Preliminary Approval - Category 3.0 or Category 4.0				
Signature	Date			
Principal's Final Approval - Category 3.0 or Category 4.0				
Signature	Date			

Category 3.0, or Category 4.0			
Superintendent's Preliminary approval for Category 3.0, or Category 4.0 is hereby granted pending review with Principal:			
Signature	Date		
Superintendent's Final approval for Category 3.0, or Category 4.0 is hereby granted			
based upon receipt of the Form FIELD TRIP /EXCURSION PLANNING CHECKLIST,			
which has been reviewed and approved by the Principal or designate.			
Signature	Date		

Distribution: 1 copy – Teacher 1 copy – Principal or Designate 1 copy – Superintendent